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PRITZKAU PATENT GROUP LLC

13337 Misty Street
Broomfield, CO 80020AttorneysMichael Pritzkau
Phone: 303-410-9254Stephen Shear
Phone: 303-661-0901Patents, Trademarks, Copyrights & Related Intellectual
Property Matters

Fax: 303-410-9258

Patent AgentsJay Beyer
Phone: 303-499-3859Yoriko Morita
Phone: 303-673-9993FACSIMILE TRANSMITTAL SHEET

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To Examiner Tuyet Thi Vo
USPTOFrom Jay Beyer
Pritzkau Patent Group

Number of Pages (including cover) 4

Date Sent November 18, 2005

Fax #: 571-273-8300

MessageResponse to Office Action

Examiner Tuyet Thi Vo,

Please enter the following documents into the file for application serial number 10/820,930. The following documents include:

Fax cover sheet	1 page
Response Transmittal (in duplicate)	2 pages
Response to Restriction Requirement	<u>1 pages</u>

Total Pages	4 pages
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If there are any questions regarding this fax, please call Jay Beyer at 303-499-3859.

Sincerely,

Jay Beyer

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PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Name Anthony Catalano

Serial No. 10/820,930

Filed: April 8, 2004

For: UNIVERSAL LIGHT EMITTING
ILLUMINATION DEVICE AND METHOD

Examiner: Tuyet Thi Vo

Group Art Unit: 2821

Att. Docket No.: TAG-1
(TAG-001-US-n)

Date: November 18, 2005

CERTIFICATE OF ELECTRONIC TRANSFER: I hereby certify that this correspondence is being electronically transmitted to the United States Patent and Trademark Office on November 18, 2005.

Signed:

Jay R Beyer

Commissioner of Patents
P.O. Box 1450
Alexandria, VA 22313-1450

SIR: Transmitted herewith is an Amendment for the above application.

- ☒ Small entity status of this application under 37 C.F.R. §§ 1.9 and 1.27 has been established
- ☒ No additional fee is required.
- ☐ Postcard included

The fee has been calculated as shown below:

	(Col. 1)	(Col. 2)	(Col. 3)	SMALL ENTITY	NON- SMALL ENTITY
	Claims Remaining	Previously Paid For	Present Extra	Rate Additional Fee	Rate Additional Fee
Total Claims	* 12	Minus **49	0	x 25 \$ 0	x 50 \$
Indep. Claims	* 3	Minus *** 4	0	x 100 \$ 0	x 200 \$
First Presentation of Multiple Dependent Claim(s)				+180 \$ 0	+360 \$
				Total \$ 0	Total \$

* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

** If the "Highest No. Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

*** If the "Highest No. Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest No. Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed.

Applicant(s) hereby Petition(s) for an Extension of Time of _____ month(s) pursuant to 37 C.F.R. § 1.136(a).
Enclosed please find PTO form PTO-2038 authorizing credit card payment of \$_____ to cover the Small Entity Additional Claim fee.

☒ The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 19-1685 (Order No. TAG-1) (a duplicate copy of this sheet is enclosed):

- ☒ Any additional filing fees required under 37 C.F.R. § 1.16 for presentation of extra claims.
- ☒ Any extension or petition fees under 37 C.F.R. § 1.17.

Respectfully submitted,



Jay R Beyer

Registration No. 39,907

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Total Claims	* 12	Minus	**49	x 25	\$ 0
Indep. Claims	* 3	Minus	*** 4	x 100	\$ 0
First Presentation of Multiple Dependent Claim(s)				+180	\$ 0
				Total	\$ 0
				Rate	Additional Fee
				x 50	\$
				x 200	\$
				+360	\$
				Total	\$

* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

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RESPONSE TO RESTRICTION REQUIREMENTRemarks

Applicants hereby elect group I (Claims 50-54, 57-61, and 63-64) without traverse. Applicants hereby reserve the right to present the claims not elected in continuing applications.

If the Examiner has any questions concerning this case, the Examiner is respectfully requested to contact Mike Pritzkau at (303) 410-9254.

Respectfully submitted,



Jay R Beyer
Reg. No. 39,907